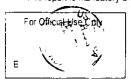
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Exp:res. 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or dividending the latest as provided by 29 U.S.C.439 or 440.



1 File Number U . 25

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2 Fiscal Year Covered From

A Name Richard J Christ  Name Richard J Christ  Name Richard J Christ  Labor Organization File Number, and add eas of labor organization #43  Labor Organization File Number   Dod. 467 ?  PO Box, Bidg., Room No., if any  Street   147   Clourcrest Road    City Worthers file   d  Street   247   Clourcrest   Road    City Hart Ford    State CT   ZIP Code - 4   Dol 09    Posnon in labor organization    Recording Secretary  Enter appropriate data below if, during the past facal year, you or your spouse or minor child directly or lad ractly had any of the following interests (each pile specified in the exclusions set forth in the instructions)  A Held an interest in engaged in transactions - robusing interests (each pile specified in the exclusions set forth in the instructions)  A Name and address of Employer (including trace hame if any)  Name  Trade Name, if any  PO Box, Bidg., Room No., if any  Sizeet   City   State   ZIP Code - 4    Signature and verification. The undersogned sectives under penalty of Polyury and order applicable per tirus of the law marall of the information secondary in regional including the information byta and many accompanying documents) has been available for the signature of the law marall of the information secondary in regional including the information byta and many accompanying documents) has been available for the signature of the law marall of the information secondary in regions and set in the instructions;  Signature and verification. The undersogned sectives under penalty of Polyury and order applicable per tirus of the law marall of the information secondary in region including the information byta and many accompanying documents) has been available.  Signature and sectification and verification and companies of the law marall of the information byta and many accompanying documents) has been available.  Signature and section in the file of the law marall of the information byta and many accompanying documents) has been available.  Signature and section and section and penaltic se	751.5	01/01/2005 Through. /31/05
Labor Organization File Number   1004-4467 ?	3 Name and address of person filing	4 Name file number, and add ess of labor organization
P.O. Box, Bidg., Room No., if any  Street 147 Clovercrest Road  City Wethers field  State CT ZIP Code + 4 06109  State CT ZIP Code + 4 06109  State CT ZIP Code + 4 06119  Position in labor organization  Recording Sucretary  Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)  A. Held an interest in, engaged in transactions and cluding loans) with, or derived income or other accompany benefit of monatory value from an employer whose employees your organization represents or is actively seeding to represent or seathers y seeding to represent or seathers yearing to represent organization represents or in actively seeding to represent organization represents or its actively seeding to represent organization represents organization represents or its active year of income.  15. Signature and verification. The undersigned sedient your organization represents or on penalties in the instructors;  15. Signature and verification. The undersigned sedient your organization and presents or on penalties in the instructors;  15. Signature and verification. The undersigned sedient your organization represents or on penalties in the instructors;	Name Richard J Christ	Name Carpenturs Local Union #43
Street 147 Clovercrest Road  City Wethers field  State CT ZIP Code+4 06109 State CT ZIP Code+4 06119  5 Position in labor organization  Recording Secretary  Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or lad rectly had any of the following interests (except as specified in the exclusions set forth in the instructions)  A Held an interest in, engaged in transactions; including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is active, seeking to represent  5 Name and address of Employer (including trade name if any)  7 a Nature of Interest, Transaction, or Income  15 Name, if any  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Cide+4  Signature  15 Signature and verification. The undersupred sectores, under penalty of Penjury and other applicable per titus of the law, that all of the information submitted in this report (including the information can all any accompanying documents) has been aware for by the signatory and is to the best of the undersigned's including the information can any accompanying documents) has been aware for by the signatory and is to the best of the undersigned's including the information can applied (See the section on penalties in the instruction's)		Labor Organization File Number 004-467 ?
City We thersfield  State CT ZIP Code+4 D6/09 State CT ZIP Code+4 O6/119  5 Position in labor organization Recording Secretary  Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or lad roctly had any of the following interests (except as specified in the exclusions set forth in the instructions)  A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seaking to represent  6 Name and address of Employer (including trade name of any)  7 a Nature of Interest, Transaction, or Income  7 a Nature of Interest, Transaction, or Income  7 b Amount  Street  City  Stoke ZIP Cide+4  Signature  15. Signature and verification. The undersigned declares under penalty of Perjury and other applicable per class of the law that all of the information submitted in this report (including the information contains a many accompanying documents) has been examened by the signatury and in the institutions:  Signature  A Held an interest in, engaged in transactions, including the past fiscal year, you or your organization represents or independent or present organization represents or independent or state of interest. Transaction, or income  7 b Amount  Signature  15. Signature and verification. The undersigned declares under penalty of Perjury and other applicable per class of the law that all of the information submitted in this report (including the information contains a many accompanying documents) has been examined by the signature of the information or penalties in the institutions.	PO Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
State CT  ZIP Code + 4 D6109  State CT  ZIP Code + 4 D6109  Position in labor organization  Record Ing Secretary  Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or and rectly had any of the following interests (except as specified in the exclusions set forth in the instructions)  A. Held an interest in, engaged in transactions; including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent  8. Name and address of Employer (including trade name of any)  Name  Trade Name, if any  P.O. Box, Bidg., Room No., if any  Street  City  State  ZIP Code + 4  Signature  15. Signature and verification. The undersigned declares under penalty of Perjury and other applicable per thrus of the law, that all of the information submitted in this report (including the information name as in any accompanying documents) has been even free by the signatory and is to the best of the undersigned's knowledge and belief true, correct, and complete (See the section on penalties in the instructors):  Signed  A. A	Street 147 Clovercrest Road	Street 885 Wethersfield Ave.
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seaking to represent  5. Name and address of Employer (including trade name if any)  Name  Trade Name, if any  P.O. Box, Bidg., Room No., if any  Signature  15. Signature and verification. The undersigned declares under penalty of Perjury and other applicable per chast of the law that all of the information submitted in this report (including the information bonds and in any accompanying documents), has been exert feet by the signatory and is to the best of the undersigned's howledge and belief true, correct and complete (See the section on penalties in the instructions).	City Wethersfield	City Hart ford
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A. Hetd an interest in, engaged in transactions; noticiting loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.  6. Name and address of Employer (including trade name of any)  7. a. Nature of Interest, Transaction, or Income  Trade Name, if any  P.O. Box, Bidg., Room No., if any  7. b. Amount.  Street  City  State  ZIP Code + 4  Signature  15. Signature and verification. The undersigned declares under penalty of Perjury and other applicable per cities of the law, that all of the information submitted in this report (including the information contained and namy accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true, correct, and complete (See the section on penalties in the instructions).  Signed  According to the following the information of the properties of the law that all of the information of the signatory and is to the best of the undersigned's knowledge and belief true, correct, and complete (See the section on penalties in the instructions).	5 Position in labor organization Recording Secretary	
Mame and address of Employer (including trade name if any)  Name  Trade Name, if any  P.O. Box, Bidg., Room No., if any  Street  City  State  ZIP Code = 4  Signature  15. Signature and verification. The undersigned declares under penalty of Perjury and other applicable per class of the law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's Fnowledge and belief true, correct, and complete (See the section on penalties in the instructions.)  Signed  Audit Claud.  On 3-27-04. 860-257-9658	Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or ind rectly had any of the following interests (except as specified in the exclusions set forth in the instructions)	
Name  Trade Name, if any  P.O. Box, Bldg., Room No., if any  7 b. Amount  Street  City  State  ZIP Code + 4  Signature  15. Signature and verification. The undersigned declares under penalty of Perjury and other applicable per altes of the law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true, correct and complete (See the section on penalties in the instruction's)  Signed  Auditude Chiral  On 3-27-06 860-257-9658	A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employer organization represents or is actively seeking to represent	
P.O. Box. Bidg., Room No., if any  7 b. Amount  Street  City  State  ZIP Code + 4  Signature  15. Signature and verification. The undersigned declares under penalty of Perjury and other applicable per stress of the law, that all of the information submitted in this report (including the information points) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true, correct, and complete (See the section on penalties in the instructions.)  Signed  Radaud Chirak  On 3-27-06  860-257-9658		
P.O. Box, Bldg., Room No., if any  7 b. Amount  Street  City  State  Signature  15. Signature and verification. The undersigned declares under penalty of Perjury and other applicable per cities of the law that all of the information submitted in this report (including the information pantained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true, correct and complete (See the section on penalties in the instructions)  Signed  Radaud Clinal  On 3-27-06 860-257-9658	Name	
State  ZIP Code + 4  Signature  Signature and verification. The undersigned declares under penalty of Perjury and other applicable per cities of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true, correct, and complete (See the section on penalties in the instructions.)  Signed Richard Chirok  On 3-27-06 860-257-9658	Trade Name, if any	
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submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true, correct, and complete. (See the section on penalties in the instructions.)  Signed Richard Clinal On 3-27-00 860-257-9658	Signature	
Signed Richard Chinal On 3-27-06 860-257-9658	submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the	
Date response Names	Signed Richard Chief	On 3-27-06 860-257-9658  Date Telephone Number